

DEPARTMENT OF TAXATION,
STATE OF HAWAII
P. O. Box 259
Honolulu, HI 96809
Attn: Bankruptcy Unit
Telephone: (808) 587-1675

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF NEW YORK

In re

MOTORS LIQUIDATION COMPANY,
ET AL., FKA GENERAL MOTORS
CORP., ET AL.,

Debtors.

CASE NO. 09-50026 (REG)
(Chapter 11)
(Jointly Administered)

Response Deadline:

June 22, 2010, 4:00 p.m.
(ET)

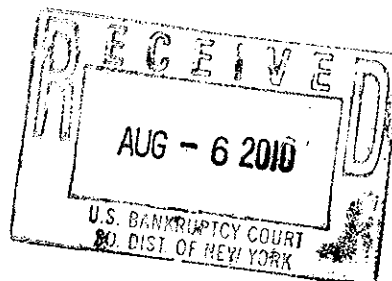
Hearing Deadline:

June 29, 2010, 9:45 a.m.
(ET)

385162

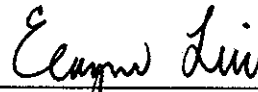
NOTICE OF WITHDRAWAL REGARDING DEPARTMENT OF
TAXATION, STATE OF HAWAII'S RESPONSE TO DEBTORS'
SEVENTEENTH OMNIBUS OBJECTION TO CLAIMS (TAX
CLAIMS ASSUMED BY GENERAL MOTORS, LLC); EXHIBIT A

The Department of Taxation, State of Hawaii
hereby WITHDRAWS its proof of claim (Exhibit A) filed



on November 13, 2009, Claim No. 24287. All returns
were filed as required.

DATED: Honolulu, Hawaii, AUG 2 2010.



ELAYNE LIU

UNITED STATES BANKRUPTCY COURT Southern District of New York		PROOF OF CLAIM
Name of Debtor MLCS LLC FKA SATURN CORPORATION		Case Number: 09-50027 (REG)
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): STATE OF HAWAII, DEPARTMENT OF TAXATION		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (if known) Filed on: _____
Name and address where notices should be sent: HAWAII STATE TAX COLLECTOR ATTN: BANKRUPTCY UNIT (EL P O BOX 259 HONOLULU HI 96809 Telephone number: _____		
Name and address where payment should be sent (if different from above): Telephone number: _____		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
1. Amount of Claim as of Date Case Filed: \$ <u>unknown</u> If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input checked="" type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507 (a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507 (a)(5). <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507 (a)(7). <input checked="" type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(): _____ Amount entitled to priority: \$ <u>unknown</u>
2. Basis for Claim: <u>see attached</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: <u>7508</u> 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % Amount of arrearage and other charges as of time case filed included in secured claim. If any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ <u>unknown</u>		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING If the documents are not available, please explain _____		*Amounts are subject to adjustment on 4-1-10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
Date: <u>11/06/2009</u> Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. LYNNE M. KANETA, TAX COLLECTOR (el) <i>lynne kaneta</i>		FOR COURT USE ONLY

Penalty for presenting fraudulent claim. Fine of up to \$500,000 or imprisonment for up to 5 years, or both 18 U.S.C. §§ 152 and 3571

EXHIBIT A

Case No. 09-50027 (REG)
Priority Claim

DETAIL STATEMENT OF TAXES DUE

[illegible]

Date: 11/06/09
Prepared By: E. Liu
Telephone: (808) 587-1675

OAHU COLLECTION BRANCH

By: Maureen K. Kaneta
for **LYNNE M. KANETA**
Tax Collector

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MOTORS LIQUIDATION COMPANY,
ET AL., FKA GENERAL MOTORS
CORP., ET AL.,

Debtors.

CASE NO. 09-50026 (REG)
(Chapter 11)

(Jointly Administered)

CERTIFICATE OF SERVICE

I hereby certify that on AUG 2 2010,
copies of NOTICE OF WITHDRAWAL REGARDING DEPARTMENT OF
TAXATION, STATE OF HAWAII'S RESPONSE TO DEBTORS'
SEVENTEENTH OMNIBUS OBJECTION TO CLAIMS (TAX
CLAIMS ASSUMED BY GENERAL MOTORS, LLC); EXHIBIT A was
duly served by depositing same in the United States
mail, postage prepaid, addressed as follows:

HARVEY R. MILLER, ESQ.
STEPHEN KAROTKIN, ESQ.
JOSEPH H. SMOLINSKY, ESQ.
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Counsel for the Official Committee of
Unsecured Creditors Holding Asbestos-
Related Claims

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ROBERT T. BROUSSEAU, ESQ.
Stutzman, Bromberg, Esserman & Plifka,
A Professional Corporation
2323 Bryan Street, Suite 2200
Dallas, TX 75201

Counsel for Dean M. Trafelet in his
capacity as the legal representative
for future asbestos personal injury
claimants

DATED: Honolulu, Hawaii, AUG 2 2010.



ELAYNE LIU